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A FRAGMENTARY PROVING.

By H. C. ALLEN, M.D.,
AND THE STUDENTS OF THE UNIVERSITY OF MICHIGAN.

A Paper Submitted at the

THIRTY-EIGHTH SESSION

OF THE

American Institute of Homœopathy,

HELD AT ST. LOUIS, MO., JUNE, 1885.

Reprint from the Transactions.

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SECALE CORNUTUM.

FIG 1—A grain of Ergot. 2—A grain magnified, showing the Spacelia Segetum of Lévillé. 3—Section of grain magnified.

SECALE CORNUTUM.

*A Fragmentary Proving, by H. C. Allen, M.D., and the Students
of the University of Michigan.*

SYNONYMS: Ergota; (Ergot or Argot, Fr., a cock's spur); Ergot of rye; Spurred rye; Secale clavatum; Mater secalis; Seigle ergoté (Fr.); Mutterkorn; Kornmutter (G.).

PREPARATIONS.

Potencies used in the proving: 2, 6, 30, 60, 100, 200, from the pharmacy of Bœricke & Tafel.

AUTHORITIES.

1. Mrs. L. M. Hayes, with the 200. This prover knew the potency but not the drug. She was perfectly convinced that in the 200 potency, no drug was capable of producing medicinal symptoms on the healthy, and persisted in repeating her experiments to verify or disprove former results. Took November 4th, six drops every other day for a week. November 17th, took six drops twice a day for a week. January 5th, took fifteen drops every day for a week. March 1st, took fifteen drops every morning for three days.

2. Miss R. C. Wilder, took six drops, 30 potency, in mornings of November 5th, 8th, 12th, 15th.

3. H. B. Reynolds, took one drachm of 2 potency, in repeated doses.

4. J. S. Campbell, took several doses of 2 potency.

5. F. W. Rogers, took one drachm of 200 potency, a dose twice a day for two weeks.

6. Mrs. M. T. Hathaway, repeated doses of 200 potency.

7. D. M. Finley, 100 potency; repeated the proving four times with same results each time.

8. Miss H. M. Swathel, took 200 potency, from March 1st to April 23d, two or three times a day. Took 100 potency from May 2d to 15th, once or twice daily.

9. G. D. Green, took 2 potency for two weeks.

10. C. S. Erswell, took 100 potency, one drachm, in daily doses for two weeks.

11. E. H. Pond, took 30 potency.

12. E. C. Watts, took 30 potency daily for a week.

Since March, 1880, the drug was given out to seventy-two volunteers, as follows :

Second	potency to	16	provers.
Third	" "	4	"
Sixth	" "	17	"
Thirtieth	" "	13	"
Sixtieth	" "	5	"
Onehundredth	" "	6	"
Twohundredth	" "	8	"
Blanks	" "	3	"

The blanks were given to those whose health, on examination, was not deemed sufficiently good to warrant a reliable proving, only one of whom (a young man who afterwards died of albuminuria) obtained or returned any results.

RULES OBSERVED.

So far as possible, every prover was examined as to health and personal qualifications; and questioned or cross-questioned on the recorded results.

Provers were directed to follow the rules laid down by Dunham for proving a drug.

No person knew what he or she was taking.

BOTANY.

Adam Lonicer, of Frankfort, about the middle of the 16th century, is the first botanical writer to notice Ergot, and soon after Thalius speaks of it as used "*ad sistendum sanguinem.*" In 1623, Caspar Bauhin mentions it under the name of *Secale*

luxurians, and in 1693 the English botanist Ray alludes to its medicinal properties.

The true nature of Ergot, whether a product of diseased vegetable life or a true vegetable itself, has long been a source of a great diversity of opinion. But according to the latest authorities, *Secale cornutum* belongs to the order Thallophyta—cellular or non-vascular plants. This is the lowest order of the vegetable kingdom and is divided into two classes, Algæ and Fungi, which is based upon the presence in the former of Chlorophyll, and its absence in the latter. They produce no differentiation of root, stem or leaf. In the lowest members of the group there is no sexual reproduction; in the higher the sexual union may be by a single spore, or a mass of spores, or a fructification within which spores are found. De Candolle and Fries in 1816, and Lévillé in 1827, added, by their researches, much to our knowledge of the intimate structure of *Secale*, but it remained to L. R. Tulasne in 1853, by his admirable monograph “*Mémoire sur l’Ergot des Glumacées*,” to clear up many disputed points in the formation, growth and development of this fungus, and this monograph is still referred to by nearly every author as the best work on the subject. Yet Flückiger and Hanbury maintain that *the true nature of Ergot has not been settled* even by Tulasne’s long continued and admirable researches.

FORMATION.

Hamilton sums up the conflicting views entertained by various writers as follows:

a. “Some regard Ergot as a fungus growing between the glumes of grasses, in the place of the ovary (hence Lévillé calls it *Spacelia segetum*).

b. “Some regard Ergot as a diseased condition of the ovary or seed.

c. “Some have supposed that ordinary morbid causes (such as moisture combined with warmth), were sufficient to give rise to this diseased condition of the grain.

d. “Some have ascribed the disease to the attack of insects or other animals.

e. "Some, dissatisfied with the previously assigned causes of the disease, have been content with declaring Ergot to be a disease, but without specifying the circumstances which induce it."

Fluckiger and Hanbury state, "That the tissue of the seed of the rye, in the process of development, does not undergo a *transformation*, but is *simply destroyed*. Neither in external form, nor in anatomical structure does Ergot exhibit any resemblance to a seed, although its development takes place between the flowering time and that at which the rye begins to ripen. It has been regarded as a complete fungus, and as such was named by De Candolle *Sclerotium Clavus*, and by Fries *Spermaedia Clavus*. No further change in the Ergot occurs while it remains in the ear; but laid on damp earth, interesting phenomena take place. At certain points, small, orbicular patches of the rind fold themselves back, and gradually throw out little white heads. These increase in size, whilst the outer layers of the neighboring tissue gradually lose their firmness and become soft and rather granular, at the same time that the cells, of which they are made up, become empty and extended. In the interior of the Ergot, the cells retain their oil drops unaltered. The heads assume a grayish-yellow color, changing to purple, and finally after some weeks stretch themselves towards the light on slender, shining stalks, of a pale, violet color. The stalks often attain an inch in length with a thickness of about half a line." Fluckiger further says: "Ergot of rye collected by myself in August, placed upon earth in a garden-pot and left in the open air unprotected through the winter, began to develop the *Claviceps* on the 20th of March."

Hering calls it an undetermined fungus, and from the doubtful position it has so long held in the world of science, classes it, not without some reason, as a "Nosode"; and when a doubtful point in *Materia Medica* is to be solved, the opinion of the venerated and scientific Hering is deserving of some consideration.

Nosode, he says: "Is the general term given to the alcoholic

extracts of morbid productions, foolishly called isopathic remedies. The most useful and fully proved are Hydrophobinum and Psorinum. To these 'Nosodes' belong the *Ustilago maidis*, the *Secale cornutum*, the fungus of the potato, the ambra of the pot fish, anthracin, vaccinin, variolin, etc., etc. The sneering remarks of Trinks and others in 1826 against *Sepia*, and the ignorant opposition to *Lachesis* have sunken into oblivion during the succeeding score of years. All the condemning remarks against the Hydrophobinum, Psorinum and other "Nosodes" will meet the same fate. We can afford to wait."

PREPARATION.

For homœopathic use the Ergot of rye should always be prepared fresh, as it is fed on by a small acarus which destroys the interior of the grain, leaving it a mere shell. Ergot kept in stock longer than a year should always be rejected on this account.

MEDICAL HISTORY.

Among the writings of the ancients there is no distinct notice to be found of Ergot. In 1089 the French historian, Sigebert, refers to an epidemic in the following passage:

"A pestilent year, especially in the western parts of Lorraine, where many persons became putrid, in consequence of their inward parts being consumed by St. Anthony's fire. Their limbs were rotten and became black like coal. They either perished miserably or, deprived of their putrid hands and feet, were reserved for a more miserable life. Moreover, many cripples were afflicted with contraction of the sinews."

An epidemic disease in Hessa in 1596 first attracted the attention of the medical profession to Ergot as a cause. Rathlaw, a Dutch accoucher, employed it in 1747, but it was not until thirty years later—1777—that the essays of Desgranges, and especially those of Stearns and Prescott in the United States, that its medicinal properties became known.

To the use of rye flour, more or less adulterated with Ergot, is attributed the formidable disease known in modern medi-

cine as *Ergotism*, but in early times by a number of names: *Morbus Spasmodicus*, *Convulsivus*, *Malignus*, *Epidemicus vel Cerealis*, *Convulsio Raphania*, *Ignus Sancti Antonia*. There is now little doubt that the terrible epidemics which occurred in France in the tenth century and in Spain in the twelfth century were due to Ergot. Fluckiger and Hanbury says:

“In the year 1596 Hessa and the adjoining regions were ravaged by a frightful pestilence, which the medical faculty of Marburg attributed to the presence of Ergot in the cereals consumed by the population. The same disease appeared in France in 1630; in Voigtland, Saxony, in the years 1648, 1649 and 1675; again in various parts of France in 1650, 1670 and 1674. Freiburg and vicinity were visited by the same malady in 1702; other parts of Switzerland in 1715–16; Saxony and Lusatia in 1716; many other districts of Germany in 1717, 1722, 1736 and 1741–42. The last European epidemic occurred after the rainy season of 1816 in Lorraine and Burgundy, and proved very fatal among the poorer classes.”

From time to time a number of monographs giving a more or less accurate description of the various epidemics supposed to have been caused chiefly by Ergot and other adulterations in France, Germany and Switzerland have appeared. In 1825, the year previous to his departure for South America, Hering made a collection of these monographs which he left with Trinks, who had it completed by one of his assistants and published. These comprise the first 80 of the 170 authorities of the *encyclopadia*, taken from Hartlaub and Trinks. The later additions are chiefly toxicological and clinical.

Dr. R. B. Johnstone, of Pittsford, N. Y., writes:

“In 1883–84, during the building of the West Shore Railroad, I was called upon to treat many of the Italian employés for an eruption which appeared upon the body in many places, but usually on the shoulders, neck and inner surface of the upper arms. In the majority of cases it was on the right side alone, but if on both sides was always worse on the right. The eruption would begin in a small point, like the prick of a pin, which would soon assume a pimple-like form

and finally become pustular and as large as a small pea. At other times they would appear as large as a small boil (half an inch across the base), of a dark bluish hue, shading off to the healthy color of the skin an inch or more from centre of boil. They were *intensely painful to touch, aching, burning and itching, better from light rubbing, worse from scratching, worse from heat.* The small ones would dry up, leaving no cicatrix, but the large ones would fill slowly with a bright yellow pus-like material, or at times a bloody, watery serum, remaining open for days, having extremely painful edges and base, and discharging towards its close a thick, dirty, offensive serum. They were decidedly indolent in character, and left a prominent cicatrix. Cool air blowing over the eruption would relieve the itching and burning, but not the pain. Secale, Lachesis, Causticum were the remedies chiefly indicated. Having learned that the Italians ate largely of rye bread made of a very poor and cheap quality of flour, while other nationalities (not eating the rye bread) did not suffer from it at all, I attributed the eruption to poisoning by *Ergot* in the bread; and if a patient presented without an interpreter I usually gave Secale, which would cure about seven cases in ten."

"H. G. K.—A miller of Pittsford, N. Y., informs me that he is unable to grind rye even for a short time. Upon entering a rye mill, had a sensation of constriction in the throat, great difficulty of breathing; difficult inspiration; expiration accompanied by soreness all over the chest; oppression of the chest; soreness of the chest; intercostal pains; pricking of the tongue.

"The foregoing symptoms are distinctively of rye grinding; when grinding wheat no symptoms follow. He also informs me that in two rye mills in Rochester he knows a number of individuals engaged therein who suffer as above with the addition of an eruption particularly on the neck, chest, behind the ears and around the waist. The eruption is pustular, itching violently, and discharges a yellow matter. One man he knew who was compelled to give up rye grinding because of the many *boils* and *carbuncles*. He recovered entirely after changing his occupation. Nearly all rye grinders have enlarged finger joints and poor teeth."

DAY BOOK OF MRS. M. F. HATHAWAY.

March 6, 1885.—Took a powder (Secale 200) every morning and at night on retiring, for three days, then at night only, for a week.

March 9th.—A sore spot felt on back part of base of tongue, left side, as though a "canker sore" were making its appearance; it was not felt in day time and passed away after a few days.

March 10th and 11th.—A slight frontal headache and some mental confusion, but not very troublesome. Sore spot on base of tongue, right side.

March 13th.—Spots with a sore bruised feeling appeared about and below the left knee. On looking found a swollen patch about the size of a silver half dollar, of a purple red color. Towards evening three or four similar spots appeared farther down the leg, about the top of the shoe, so sore could scarcely bear the touch of the shoe, and attended with violent itching, but were so extremely sore could not scratch them, and when touched gave me a faint, sick feeling.

March 14th.—Headache and confusion more pronounced, and chiefly in frontal region. Three or four more spots appeared on right leg below the knee, with violent itching and the same sore bruised feeling.

March 15th.—An eruption in the form of a rash or small pustules appeared on the face, left side chiefly, very sore and sensitive to touch. It would begin in fine points like the prick of a pin or the sting of an insect and gradually increasing in size to a small pustule as large as a pea. Felt like the spots on the legs, with the same sore, bruised feeling in the skin of face and neck. There were twenty-eight small pustules on left side of face and neck.

March 18th.—The eruption appeared on the left shoulder, several small pustules in a cluster, with the same characteristic soreness. Ceased taking drug. Dull, heavy headache in the forehead and eyes; much throbbing.

Before the menses (four or five days) a dark colored leucor-

rhœa was observed, not very profuse, but attended with a tired and very uneasy feeling in the pelvis.

April 5th.—The eruption on face, neck and shoulders gradually disappeared, but left discolored, echymosed spots and patches like the remains of an old bruise for several weeks, especially on lower leg.

April 18th.—Menses appeared on time, *very profuse* for the first three or four days, accompanied by a good deal of pain and an uneasy sore feeling through the pelvis (much more than usual), but an unusual amount of pain for a week before the menses. Flow darker, much more profuse (formerly profuse for one day) for four days. Considerable clotting. The flow continued for ten days, a circumstance which never occurred before. Vertigo during entire menstrual period, with inclination to fall forwards.

Was attacked while at lectures with palpitation which continued nearly all the afternoon. Could feel the heart flutter and remit. Pulse 108 and 110. Violent throbbing of the carotids, faint for several hours. Never had palpitation before in her life. Headache; full, throbbing, bursting, like a Glonoine headache (has proved Glonoine), only not so sore on shaking the head.

SYMPTOMATOLOGY.

Mind.—Memory failed. Forgot names of friends whom I met daily¹.

*Confusion of mind*¹. Unpleasant forebodings¹.

Anticipated misfortunes, as though about to lose something of great value¹.

Sensation of intoxication while undressing, to retire, (third day and for several successive evenings³).

During entire proving I experienced an elevation of spirits, felt buoyant and exhilarated⁵.

Head.—Vertigo during entire last menstrual period; inclination to fall forwards⁶.

Head heavy. Sharp stinging pain running upwards through the left eye into forehead and left side of head; coming in paroxysms⁷.

A dull, heavy, at times pressing headache, most severe on right side; aggravated in warm room, but not ameliorated in open air².

Dull pain on each side of the head, above and before the ears, worse in warm room. At times it was throbbing, and continued with more or less severity for three weeks after leaving off the drug. It was semi-lateral at times, and seemed to prefer the right side and forehead¹².

Feels oppressed; stupid, heavy; aches every night; would waken me at night; ameliorated by eating breakfast and exercise¹.

Could not sleep on account of the fearful oppressive headache, extending from occiput up over head to the eyes¹.

Severe pain in occiput, forehead, temples, back of eyes, aggravated by pressure on nape of neck¹.

Headache aggravated in open air, and first entering warm room; as after riding in cold north wind in winter, when entering warm room the head aches so fearfully¹.

More or less, a dull headache during the entire proving, especially in the forehead and eyes⁶.

Head full, throbbing, bursting, like a Glonoine headache, though not so sore on shaking the head⁶.

Outer Head.—*Scalp sore*; so painful, cannot bear to move the hair¹.

Felt as though the hair had been parted in a new place, or pressed by hair pin¹.

Hair looked at roots as though bulbs were enlarged¹.

Scalp slightly pink in irregular spots; pimples appeared over scalp; small, very sore to touch, with slight burning sensation¹.

Face.—Oppressed, full of blood during fever¹.

Face and neck feel hot, as if full of blood and ready to burst¹.

Nose.—Passive morning epistaxis from left side, bright red³.

Morning nose-bleed, something very unusual; left side only, passive, but bright red⁵.

Nose stopped up on left side as with a solid plug, but not much discharge⁷.

Nose sore to touch externally and internally⁷.

Nose-bleed not very profuse, recurring for several successive days¹⁰.

Bleeding at the nose on every attempt to wipe it¹¹.

Tongue.—Coated yellowish brown through the middle, sides clean¹.

Mouth: dry, but seldom thirsty. Burning, dry, sensation, not relieved by drinking. Brackish taste¹.

In the evening (second day) a sore spot felt on the back of the tongue, left side, as though a "canker sore" were making its appearance⁶.

In the evening of third day the same sore feeling on the tongue, but on right side. This is not felt at all during the day time⁶.

Throat.—Soreness with dryness and sensation of constriction, better by swallowing; symptoms worse mornings^{3 9}.

Rawness, dryness and constriction of throat, without any pain⁴.

Throat sore on left side running up into ear^{7 9}.

Throat on right side red, sore, with a feeling as if it were constructed of tense and hard fibres, very slightly hoarse⁸.

Later throat felt constricted, chiefly on right side; right side and back of throat inflamed, red and "stiff," some pain on swallowing⁸. (I am not inclined to right sided sore throat, almost all my attacks of the kind being confined to the left side).

Stomach.—Eructations: having the odor of burnt horn¹.

Appetite much increased; was very hungry, ashamed to eat as much as I desired¹.

Felt as though I had dined on chopped cabbage¹.

Nausea after leaving table¹.

Felt too full, fermented; much flatulence¹.

Flatulent rumbling through stomach and bowels¹.

A tired sensation—one of distress and oppression—over region below the stomach, was present much of the time during the proving¹.

Abdomen.—Abdomen much distended¹.

Distension of abdomen; much flatulence as though soon to suffer from diarrhoea¹.

Spasmodic jerking of small intestines near sigmoid flexure as though tied about with strings, which were interruptedly pulled. Worse evening, and better by pressure and lying on affected side. This lasted about three weeks⁵.

Bowels felt weak, sick, faint, as in summer from eating too much fruit; no pain but hot and dry internally¹.

Bowels did not pain, and seemingly would have been relieved of heat, dryness and uncomfortable feeling if I could have drunk water enough to reach them, which I was unable to do. Neither drinking water nor an enema gave relief¹.

Stool.—Constipated; dry, dark, detached, yet difficult to expel. No desire for days; feels as though rectum was full¹.

Frequent stools; light colored, soft¹.

Diarrhoea: stool small, scanty. Almost every time urine was passed *during the day*, a small stool¹.

Constant desire for stool¹.

Urinary Organs.—Urine increased in quantity, lighter color, passed more frequently, especially at night. Milky on standing a short time¹.

Pressure in bladder at night¹.

Sexual Organs.—Sharp pains in left ovarian region, week before menses¹.

Menses a week too soon, (always regular before to a day)¹.

Flow bright red and coagulable; many clots¹.

Offensive in odor; *a cold cadaverous smell*¹.

Before the menses (four or five days) a dark colored leucorrhoea was observed, not very profuse, but with a very uneasy feeling about the pelvis⁶.

Menses appeared very profuse, lasting for ten days, but only profuse for the first three or four days, accompanied by a great deal of pain and an uneasy sore feeling (more than usual), and a dull headache during entire proving, especially in forehead and eyes⁶.

Catamenia occurred on time. Flow easy, abundant, painless and entirely without clot⁸.

Passed a membrane. Period ceased, (fifth day) having been entirely free from discomfort⁸.

At second period the flow was of good color, rather fluid, a few clots⁶.

Continuous exercise stopped it on the second day, but no backache, headache or other disagreeable symptoms appeared in consequence⁸.

Next period appeared at proper time "with few premonitory symptoms," but with a feeling all day as if I *must keep still* or have the flow checked. Passed a membrane. In four days menses ceased. (During the spring months of the past two years have passed membranes at the monthly period, but never before in *consecutive* months). The flow is usually attended with uneasy feelings and is always *greatly clotted*⁸.

Leucorrhœa the week before, discharge like white of egg (many times daily), changed just before menses to a yellowish offensive discharge; irritating; relieved by bathing parts in cold water¹.

After menses sharp pains in uterus and pelvic region, with dragging, bearing down sensation, and aching across small of back¹.

Genital organs feel as if full of hot blood, pressed to their utmost capacity. The surface did not burn, but felt as though blood-vessels were filled with hot blood¹.

Uterus prolapsed; region sore to touch. This condition continued for weeks¹.

Menses one week too soon, too profuse, and what is very unusual, attended with much bearing, pressing down pain².

Second month, four days too soon, flow darker than customary and offensive, but not clotted; lasts two days longer and is too profuse but not weakening².

Vertigo at the time of the menses with pain and heaviness in the pelvis for a week before the menses⁶.

Unusual amount of pain and heaviness in pelvis for a week before menses⁶.

Flow darker, much more profuse, (formerly profuse for one day only) but this lasted four days⁶.

Considerable clotting⁶.

Chest and Respiratory Organs.—Lungs during chill felt as though respiration fanned air on a perfectly dry surface; only during chills¹.

Sharp pains through left chest, especially when walking¹.

Heart and Pulse.—During the entire proving palpitation of the heart (something I never had before in my life); could feel the heart flutter and remit⁶.

Palpitation nearly all the afternoon⁶.

Violent throbbing of the carotids; faint for several hours⁶.

Was attacked while at lectures with palpitation which continued about eight hours⁶.

Pulse 108 and 110⁶.

Throbbing of the carotids; faint for several hours⁶.

Neck and Back.—Muscles of neck stiff, sore¹.

Shoulder blades and clavicle lame, as though wrenched or twisted¹.

Back aches; feels weak, especially in sacrum¹.

Sharp, shifting pains in all parts of body¹.

Extremities.—Have pained me much¹.

No strength in limbs or between shoulders¹.

Glad to sit down; too weak to talk; tired¹.

Upper Extremities.—Shifting pains first through my hands from one finger to another, then through the wrist joint¹.

Wrist weakened so it was painful to lift weights¹.

Sensation of burning on left hand as though irritated with Cayenne, warm after rubbing⁶.

Dull, spasmodic pain from shoulder to elbow along median nerve, worse on right side and in morning⁵.

Lower Extremities.—Shifting pains through ankles and knees¹.

Legs so weak gave out while walking¹.

Knees so weak could hardly reach top of stairs¹.

Legs would "give out" suddenly¹.

Skin.—Several sore pimples, the size of a pin's head, gradually increasing to the size of a pea or larger, appeared on face, worse on right side; lastly, boil, very red, sore, swollen, painful, on right cheek near insertion of masseter muscle¹. Made me sick in bed, so fearfully painful; whole face congested and swollen. Discharged much *green pus*, finally a *green core* (bright green), and leaving a deep scar, which was long in healing¹.

On the seventh day several spots with a sore, bruised feeling appeared about and below the knee, the size of a half dollar, of a purple red color; then three or four similar spots appeared further down the leg, about the shoe top, which were so sore could hardly bear the pressure of the shoe. They itched violently, but were so sore could not scratch them, and when touched gave me a sick faint feeling⁶.

These first appeared on the left side, then three or four appeared on the right leg⁶.

With them a rash appeared on the face which was very sore and felt like the spots on the legs, only they were smaller, but there was the same sore, bruised feeling in them. It would begin in fine points like the prick of a pin or the sting of an insect, and gradually increase in size to a small pustule as large as a pea⁶.

When spots disappeared they left a blue (echymosed) mark for several weeks, especially on the legs⁶.

Immediately after the same kind of spots appeared on the shoulders, three or four in a cluster, with the same sore, bruised feeling⁶.

The same characteristic spots appeared six weeks later in another proving, twenty-eight of them in all, which were peculiarly sensitive to the touch, accompanied by faintness and nausea. Some resulted in pustules⁶.

Chill.—Chilly sensation from least motion in bed at night, not ameliorated by covering up¹.

Chilly all over, especially shoulders and back, but do not shiver or shake¹.

Kept limbs drawn up close to body, are too cold to lie straightened out; they ache but are too cold to straighten out¹.

Limbs and whole body ache as though tired and lame, particularly hips and knees¹.

Get warm about 5 A. M., then hands, chest and back moist with perspiration¹.

Chill at 11 A. M., lasting three hours¹.

Chills would creep up and down the back between the shoulders, spreading down and out into the limbs¹.

Chills in back up and down the spine¹.

Heat.—Fever followed with great *oppression* of face and head¹.

Desired fresh air constantly, though walking any distance would aggravate the headache, especially over eyes and through the forehead¹.

Sweat.—Slight in the morning¹.

Hands, back and chest moist with perspiration about 5 o'clock in the morning¹.

Sleep.—Disturbed by distressing dreams. Surrounded by danger, constantly trying to escape evils. Sometimes my family were sick unto death, or the house on fire; again I was pouring water from one bucket into another to free it from lizards and reptiles, that would crawl over the sides of the vessel and endanger my children¹.

Night after night my dreams would continue of this character. I would waken, my head would be in such distress, not from pain but oppression. I would turn my pillow and change my position to endeavor to forget my dreams, and after some time would again fall asleep, to be awakened by another equally unpleasant dream¹.

This condition of head and sleep lasted six or seven weeks¹. (November 17th to January 5th).

Generalities.—Many sharp, shifting pains in different parts of body, and stiffness of back and neck as though muscles were swollen close to occiput¹.

